

01/18/01



21-19-01

A

PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

481340010032

First Inventor

Huang

Title

Packet Loss Compensation Method  
Using Injection of Spectrally...

Express Mail Label No.

EL711874397US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 7]  
(preferred arrangement set forth below)
- Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 3]
5. Oath or Declaration [Total Pages     ]
- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 17 completed)
- i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of  
(when there is an assignee) Attorney
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure ☐ Copies of IDS  
Statement (IDS)/PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☒ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Other: U.K. 0001157.7 filed  
1-18-2000

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: \_\_\_\_\_/\_\_\_\_\_

Prior application information:

Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**☐ Customer Number or Bar Code Labelor ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name

David B. Cochran, Esq.

Address

Jones, Day, Reavis &amp; Poque

North Point, 901 Lakeside Avenue

City

Cleveland

State

OH

Zip Code

44114

Country

US

Telephone

216/586-3939

Fax 216/579-0212

Name (Print/Type)

David B. Cochran

Registration No. (Attorney/Agent)

39,142

Signature

David B. Cochran

Date

1/18/2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Duplicate Copy

PTO/SB/17 (09-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$) 710.00

## Complete if Known

Application Number

Filing Date

January 18, 2001

First Named Inventor

Huang

Examiner Name

Group Art Unit

Attorney Docket No.

481340010032

## METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
Number  
  
Deposit  
Account  
Name

501432

Jones, Day

- ☒ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status.  
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money  
Order ☐ Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee  
Code (\$) Code (\$) Fee Description

101 710 201 355 Utility filing fee  
106 320 206 160 Design filing fee  
107 490 207 245 Plant filing fee  
108 710 208 355 Reissue filing fee  
114 150 214 75 Provisional filing fee

Fee Paid

710  
-  
-  
-  
-

SUBTOTAL (1) (\$) 710.00

## 2. EXTRA CLAIM FEES

Total Claims 5  
Independent Claims 2  
Multiple Dependent -

Extra Claims 20\*\* = 0  
3\*\* = 0

Fee from below  
Fee Paid

0  
0  
-

Large Entity Small Entity

Fee Fee Fee Fee  
Code (\$) Code (\$) Fee Description

103 18 203 9 Claims in excess of 20  
102 80 202 40 Independent claims in excess of 3  
104 270 204 135 Multiple dependent claim, if not paid  
109 80 209 40 \*\* Reissue independent claims over original patent  
110 18 210 9 \*\* Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$) -0-

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Fee Fee Fee  
Code (\$) Code (\$) Fee Description

105 130 205 65 Surcharge - late filing fee or oath  
127 50 227 25 Surcharge - late provisional filing fee or cover sheet  
139 130 139 130 Non-English specification  
147 2,520 147 2,520 For filing a request for *ex parte* reexamination  
112 920\* 112 920\* Requesting publication of SIR prior to Examiner action  
113 1,840\* 113 1,840\* Requesting publication of SIR after Examiner action  
115 110 215 55 Extension for reply within first month  
116 390 216 195 Extension for reply within second month  
117 890 217 445 Extension for reply within third month  
118 1,390 218 695 Extension for reply within fourth month  
128 1,890 228 945 Extension for reply within fifth month  
119 310 219 155 Notice of Appeal  
120 310 220 155 Filing a brief in support of an appeal  
121 270 221 135 Request for oral hearing  
138 1,510 138 1,510 Petition to institute a public use proceeding  
140 110 240 55 Petition to revive - unavoidable  
141 1,240 241 620 Petition to revive - unintentional  
142 1,240 242 620 Utility issue fee (or reissue)  
143 440 243 220 Design issue fee  
144 600 244 300 Plant issue fee  
122 130 122 130 Petitions to the Commissioner  
123 50 123 50 Petitions related to provisional applications  
126 240 126 240 Submission of Information Disclosure Stmt  
581 40 581 40 Recording each patent assignment per property (times number of properties)  
146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))  
149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))  
179 710 279 355 Request for Continued Examination (RCE)  
169 900 169 900 Request for expedited examination of a design application

Fee Paid

Other fee (specify)

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) -0-

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)

David B. Cochran

Registration No.  
(Attorney/Agent)

39,142

Telephone

216/586-3939

Signature

David B. Cochran

Date

1/18/2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.